PART B - FEE(S) TRANSMITTAL

OCI 0 9 2005		P.O. Box 1450 Alexandria, Vi	for Patents rginia 22313-1450	/
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10/04/2005 CCHAU2 00000011 194545 096887	17	Stephanie		(Depositor's name)
1 FC:1501 1400.00 DA		/tegliau	Signatur Klezo (Signatur	
0 2 FC:8001 9-00 DA		30 SEPTEM	BER 2005	(Date)
APPLICATION NO. FILING DATE	FIRST N	AMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/688,717 10/16/2000	Ed	ward J. Fiore	98-046-NSC/STK98046PUS	3002
TITLE OF INVENTION: ARBITRATED LOOP POR	r switching	10/04/2005 CCHAU	2 00000012 194545	09688717
		01 FC:8001	12.00 DA	
APPLN. TYPE SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO	\$1400	\$0	\$1400	12/13/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS	7	
PHAN, MAN U	2665	370-400000	-	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		
3. ASSIGNEE NAME AND RESIDENCE DATA TO	BE PRINTED ON THE PA	TENT (print or type)		
PLEASE NOTE: Unless an assignee is identified by recordation as set forth in 37 CFR 3.11. Completion	pelow, no assignee data will of this form is NOT a subs	ll appear on the patent. If an assitute for filing an assignment.	ignee is identified below, the	document has been filed fo
(A) NAME OF ASSIGNEE	(B) RESII	DENCE: (CITY and STATE OR C	OUNTRY)	
Storage Technology Corpo	oration	Louisville, Color	ado	
Please check the appropriate assignee category or categ	ories (will not be printed on	the patent):	Corporation or other private g	roup entity Governmen
4a. The following fee(s) are enclosed:		ent of Fee(s):		
		heck in the amount of the fee(s) is ment by credit card. Form PTO-20		
Advance Order - # of Copies 3		Director is hereby authorized by t Account Number 19-454		r credit any overpayment, t
5. Change in Entity Status (from status indicated abov	e)			
a. Applicant claims SMALL ENTITY status. See The Director of the USPTO is requested to apply the Iss NOTE: The Issue Fee and Publication Fee (if required) interest as shown by the records of the United States Pa		Applicant is no longer claiming SM (if any) or to re-apply any previo nyone other than the applicant; a r		(0/(/
Authorized Signature	20lo	Date	Sept 30,2005	
Typed or printed name Timothy R. So	chulte	Registrati	′ 20 012	
This collection of information is required by 37 CFR 1. an application. Confidentiality is governed by 35 U.S.C submitting the completed application form to the USP	311. The information is request. 122 and 37 CFR 1.14. The	uired to obtain or retain a benefit buis collection is estimated to take l	y the public which is to file (at 2 minutes to complete, including comments on the amount of the	and by the USPTO to processing gathering, preparing, and

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